

cs 1/6/03

HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Temporal, Clara			941-0556
MAILING ADDRESS (Street)			FAX
1654 S. King St.			945-0019
(City)	(State)	(Zip Code)	
Honolulu, HI 96826			
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	
Honolulu, HI 96826			

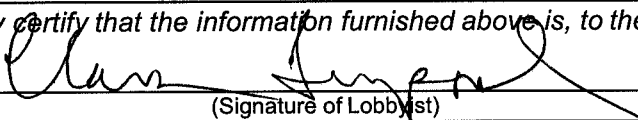
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Hawaii Credit Union League			941-0556
MAILING ADDRESS (Street)			FAX
1654 S. King St.			945-0019
(City)	(State)	(Zip Code)	
Honolulu, HI 96826			
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Dorie Fitchett			941-0556
MAILING ADDRESS (Street)			FAX
1654 S. King St.			945-0019
(City)	(State)	(Zip Code)	
Honolulu, HI 96826			

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input type="checkbox"/> Science, Technology & Economic Development
<input type="checkbox"/> Communications & Public Utilities	<input type="checkbox"/> Government Operations & Finance	<input type="checkbox"/> Intergovernmental Relations, International Affairs	<input type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input type="checkbox"/> Hawaiian Affairs	<input type="checkbox"/> Labor & Employment	<input type="checkbox"/> Transportation
<input type="checkbox"/> Culture, Arts, Historic Preservation	<input type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	<input checked="" type="checkbox"/> Other: (indicate below)
<input type="checkbox"/> Ecology, Energy Environmental Protection	<input checked="" type="checkbox"/> Housing	<input type="checkbox"/> Public Safety & Corrections	<u>Financial</u>
			<u>Institutions</u>

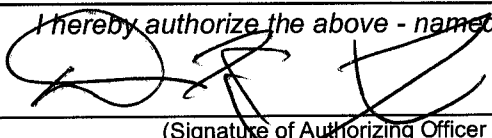
PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

January 3, 2003
(Date)

PART V AUTHORIZATION TO LOBBY

NAME Dennis K. Tanimoto		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED President	
NAME OF ORGANIZATION (if applicable) Hawaii Credit Union League		TELEPHONE 941-0556	
MAILING ADDRESS (Street) 1654 S. King St.		FAX 945-0019	
(City) Honolulu, HI	(State) 96826	(Zip Code)	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.			
 (Signature of Authorizing Officer or Person Represented)		January 3, 2003 (Date)	